10/	691	6	88
7	~ <i> </i>		

PATENT	APPLICATION	FEE	DETERMINATION	RECORD

FORM PTO-875 (Rev. 10/03)

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Application or Docket Number

	*	Effec	tive Octo	ber 1, 20	203			5	400	3.81	106.050	00
		CLAIMS A	S FILED (Colum		-	umn 2)	SMAL TYPE	L EN	ITITY	OR		THAN ENTITY
T	OTAL CLAIM!	S	9	3	·		RAT	F	FEE	٦	RATE	FEE
F	OR		NUMBE	R FILED	NUM	BER EXTRA	BASIC		385.00	1,,,	BASIC FEE	
T	OTAL CHARGE	ABLE CLAIMS	0.2 m	inus 20=	•.	3	7/0			٦٥٨		110.00
INDEPENDENT CLAIMS		/ minus 3 =		• 1		XS S) <u>=</u>		OR	X\$18=	54	
MULTIPLE DEPENDENT CLAIM P					3	X43	=		OR	X86=	258	
					+145	=		OR	+290=	0		
•	the differenc	e in column 1 is	less than a	zero, enter	"0" in	column 2	TOTA	\L		OR	TOTAL	119/2
Prand (Column 1) (Column 2) (Column 3)						SMA	LLE	NTITY	OR	OTHER SMALL	THAN	
AMENDMENT A	A	"CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER JUSLY FOR	PRESENT EXTRA	RAT		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
S	Total	.26	Minus	- 2	<u>3</u>	- 3	X\$ 9			OR	X\$18≖	5400
AME	Independent	8	Minus	. *** (2	- 2	X43=			OR	X86=	17200
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
	10.00	(Column 1)	r	(Colum		(Column 3)	ADDIT. F	EEL	Paid	OR,	TOTAL ADDIT, FEE	226.0
AMENDMENT B		REMAINING AFTER AMENDMENT	*	PREVIO PAID F	ER USLY	PRESENT EXTRA	RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**	10-2	B .	X\$ 9=			OR	X\$18=	
AM	Independent	NTATION OF MU	Minus	PENDENE.	0. 4 0.4	=	X43=			OR	X86=	7.9
	TINOT FILESC	MANOR OF MC	LIPLE DE	PENUENT	CLAIM		+145=			OR	+290=	
					•	· .	ADDIT, FE			OR A	TOTAL ODIT. FEE	*
-		(Column 1)		(Colum		(Column 3)						
AMENDMENI C		REMAINING AFTER AMENDMENT	,	HIGHE NUMBI PREVIOL PAID F	ER JSŁY	PRESENT EXTRA	RATE	TI	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
Ž	Total	•	Minus	**		=	X\$ 9=	T		OR	X\$18=	
	Independent		Minus	444	- 1		X43=	-				
	FIRST PRESE	NTATION OF MU	LTIPLE DEI	PENDENT	CLAIM			_		OR	X86=	
• ' [the entry in cohin	mn 1 is less than the	color in sec.	me 2 meter	0° 1		+145=			OR	+290≖	· • • · • · • · • · • · •
1	The Highest Nur	mber Previously Pai mber Previously Pai	d For IN THI	S SPACE is I	ess than	20 enter "20 "	TOTA ADDIT. FE			OR A	TOTAL DOIT FEE	٠
1	he "Highest Num	ber Previously Paid	For (Total or	Independen	t) is the	highest number fo	und in the a	rbbrol	priate box	ju cojni	mn 1.	